

Forest Fire Protection Grant Program Reimbursement Request

Form 4300-120 (R 9/04)

Notice: This form is required under ss. 26.145, 23.11, 28.07 and 227.11(2)(a), Wis. Stats., and Chapter NR 47, subch. VIII, Wis. Adm. Code. Failure to provide this information may result in denial of benefits. Personally identifiable information requested on this form is not likely to be used for purposes other than that for which it is originally being collected.

Fire Organization Name		LEAVE BLANK-DNR USE ONLY	
		CF Initials/Date _____	
		FN Initials/Date _____	
Grant Number	Actual Expenditures	Adjustments	Grant Eligible Expenditures
1. Category			
a. Personal Protective Equipment (clothing must meet NFPA 1977 standards)			
b. Forest Fire Training			
c. Forest Fire Prevention Materials			
d. Forest Fire Suppression Tools, Equipment, Supplies and Materials			
e. Dry Hydrants (Water Points), including materials for dry hydrants			
f. Communication Equipment for Forest Fire Suppression or Protection (radios, pagers, base stations, repeater towers, etc.)			
g. Mapping, Rural Numbering Systems or Direction/Location Devices, such as GPS			
h. Off-road All-wheel Drive Initial Attack Vehicles of 1/2 to 5 ton capacity that are used for forest fire suppression (vehicles limited to individual fire department applicants)			
2. Total Grant Expenditures			
X Grant Share			x .50
3. TOTAL GRANT FUNDING			

Certification - I certify, to the best of my knowledge and belief, that the billed costs of expenditures are based on actual payments of record and are in accordance with the terms of the FFP grant contract and that the reimbursement represents the grant share due that has not been previously requested. I also certify that the items purchased have been received and all bills have been paid.

Signature of Authorized Representative		Date Signed
Printed or Typed Name of Authorized Representative		Title
Office Telephone Number	Home Telephone Number	